Attorney's Docket No.: 42390P9821

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (FOR INTEL CORPORATION PATENT APPLICATIONS)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below, next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

## LUMINANCE COMPENSATION FOR EMISSIVE DISPLAYS

are specif	ication of which			
	$\Sigma$	is attached hereto.		
	<u></u>	was filed on	as	
		or PCT International Applic	umber	
		and was amended on	ation Number	
			(if applicable)	•
in public has not be foreign to	use or on sale in the Unit cen patented or made the	s of America before my invention my invention thereof or more that ed States of America more than subject of an inventor's certification an application filed by	an one year prior to this appl one year prior to this applicate ite issued before the date of to me or my legal representative	lication, that the same was not ation, and that the invention this application in any country tes or assigns more than twelve
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I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION NUMBER	FILING DATE	STATUS (ISSUED, PENDING, ABANDONED)

I hereby appoint the persons listed on Appendix A hereto (which is incorporated by reference and a part of this document) as my respective patent attorneys and patent agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

Send correspondence to:

Howard A. Skaist, Reg. No. 36,008, BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN, LLP (Name of Attorney or Agent)

12400 Wilshire Boulevard, 7th Floor, Los Angeles, California 90025 and direct telephone calls to:

Howard A. Skaist, (503) 684-6200.

(Name of Attorney or Agent)

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Mailing Address	
Full Name of Fourth/Joint Inventor (given name, family name)  Inventor's Signature	Date
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Mailing Address	(Country)
Full Name of Fifth/Joint Inventor (given name, family name)	
Inventor's Signature	Date
Residence	Citizenship
(City , State) Mailing Address	(Country)

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Inventor's Signature	Date	
Residence	Citizenship	
(City , State)		(Country)
Mailing Address		
Full Name of Seventh/Joint Inventor (given name, family r	ame)	
Inventor's Signature	Date	
Residence	Citizenship	
(City , State)		(Country,
Mailing Address		
Full Name of Eighth/Joint Inventor (given name, family nar	ne)	
Inventor's Signature	ne) Date	
Inventor's Signature	Date	
Inventor's Signature		(Country)
Residence (City , State)	Date	(Country)
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Inventor's Signature  Residence (City , State)  Mailing Address	Date Citizenship	(Country)
Inventor's Signature  Residence (City, State)  Mailing Address	Date Citizenship	(Country)
Inventor's Signature  Residence (City, State)  Mailing Address  Full Name of Ninth/Joint Inventor (given name, family name)	Date  Citizenship	
Inventor's Signature  Residence (City, State)  Mailing Address  Full Name of Ninth/Joint Inventor (given name, family name inventor's Signature	Date  Citizenship  Date	(Country)
Inventor's Signature  Residence (City, State)  Mailing Address  Full Name of Ninth/Joint Inventor (given name, family name (inventor's Signature	Date  Citizenship	
Residence  (City, State)  Mailing Address  Full Name of Ninth/Joint Inventor (given name, family name Inventor's Signature  Residence	Date  Citizenship  Date	

\* \*\* \*\*\* \*

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## Full Name of Tenth/Joint Inventor (given name, family name) Inventor's Signature Date Citizenship Residence (City, State) (Country) P. O. Address Full Name of Eleventh/Joint Inventor (given name, family name) Inventor's Signature Date Citizenship Residence (City, State) (Country) Mailing Address

## APPENDIX A

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